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CONFIRMATION NO. 6695

<b>SERIAL NUMBER</b> 10/775,540	<b>FILING OR 371(c) DATE</b> 02/10/2004 <b>RULE</b>	<b>CLASS</b> 172	<b>GROUP ART UNIT</b> 3671	<b>ATTORNEY DOCKET NO.</b> 13506-015001
<b>APPLICANTS</b> David R. Maas, Owatonna, MN; Scott W. Bjorge, Owatonna, MN;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/638,953 08/11/2003 PAT 7,055,617 and is a CIP of 10/281,786 10/28/2002 PAT 6,691,791 which is a DIV of 09/821,373 03/29/2001 PAT 6,513,603 <i>OK</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 05/06/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>6/8/07</i> Verified and Acknowledged <i>jm</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 17
		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 26191				
<b>TITLE</b> Soil aeration device				
<b>FILING FEE RECEIVED</b> 605	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	